



APPLICATION FOR SUBDIVISION APPROVAL

CONTACT INFORMATION

Property Owners(s):

Name: _____

Address: _____

Telephone Number: () _____ Fax: () _____

Applicant:

(if different from above)

Name: _____

Address: _____

Telephone Number: () _____ Fax: () _____

Engineer/

Name: _____

Surveyor/

Address: _____

Architect:

Telephone Number: () _____ Fax: () _____

Primary Contact Person: _____

TYPE OF APPLICATION

(Please check all that apply)

- ☐ **Discussion** - Informal meeting with Planning Board.
- ☐ **Minor Subdivision** - Creation of no more than two (2) new lots from existing lot.
- ☐ **Lot Line Adjustment** – Exchange or transfer of land between existing, adjacent lots, no additional lots created.
- ☐ **Major Subdivision** – Creation of three (3) or more new lots from existing lot(s).
- ☐ **Design Review Plan** ☐ **Final Plan** ☐ **Cluster**
- ☐ **Other** - (i.e. amendments and/or revisions)

SITE INFORMATION

LOCATION: Tax Map Number _____ Lot(s) _____ **ZONING DISTRICT:** _____

ROAD FRONTAGE ON: _____ **TOTAL SITE AREA:** _____

BRIEF DESCRIPTION OF PROJECT: _____

NAME OF EXISTING OR PROPOSED SUBDIVISION: _____

INSTRUCTIONS FOR SUBMITTING A COMPLETE APPLICATION (Please read carefully)

For an application to be scheduled on the next available Planning Board agenda, the following items **MUST** be submitted to the Department of Planning & Community Development by noon (12:00 p.m.) on the officially posted submittal date:

- ☐ **1. Completed and signed SUBDIVISION APPLICATION FORM and ABUTTERS LIST.**
The application will not be placed on the Planning Board agenda unless all required signatures are on the application. The owner **MUST** sign the application form.
- ☐ **2. Five (5) prints of the subdivision plan or subdivision plan set.**
At least one (1) plan **MUST** be signed by the owner. All applicable information as described on the attached SUBDIVISION CHECKLIST **MUST** be shown on the plans. Owner's signature must be on at least one (1) plan, indicating his/her knowledge of the plan and application. **DO NOT** submit any mylars until the Planning Board grants approval.
- ☐ **3. Application fee and Abutter Mailing Fees.**
Check with the Department of Planning & Community Development prior to determining the application fee and abutter-mailing fee. Checks are to be made payable to the Town of Milford once the fee is calculated.

AUTHORIZED SIGNATURES

Owner(s): I/We, as owner(s) of the property described hereon, certify that this application is correctly completed with all required attachments and requirements in accordance with the Subdivision Regulations for the Town of Milford. I/We also authorized members of the Milford Planning Board and its agents to access the property described on this application for on-site review of the proposed subdivision.

Name (please print) and Title

Date

IF APPLICABLE:

Owner(s) authorization for Applicant or Agent to represent the application:

The applicant or agent, as stated hereon, has authorization from the property owner to submit this subdivision application and represent the property owner on matters relative to the Town subdivision approval process.

Owner's Signature

Date

Applicant's Signature:

I acknowledge, as the applicant stated hereon, that this subdivision application has been completed and submitted in conformance with all applicable Town of Milford regulations, and that I am the designated representative for the property owner on matters relative to this subdivision application.

Applicant's Signature

Date

Agent's Signature (someone other than the Owner or Applicant who is representing the project):

I acknowledge, as the agent stated hereon, that this subdivision application has been completed and submitted in conformance with all applicable Town of Milford regulations, and that I am the designated representative for the property owner on matters relative to this subdivision application.

Agent's Signature

Date

ABUTTER LIST

ABUTTER - Any person whose property adjoins or is directly across the street, stream or railroad property from the land under consideration.						
	MAP #	LOT #	PROPERTY OWNER	COMPLETE MAILING ADDRESS:		
				Town	State	Zip Code
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Signature of Owner

Date: _____